

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SAFE NATION PAC INC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2012"/> | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="100.00"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="60500.00"/> | <input type="text" value="60600.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="60600.00"/> | <input type="text" value="60600.00"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="48993.99"/> | <input type="text" value="48993.99"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="11606.01"/> | <input type="text" value="11606.01"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SAFE NATION PAC INC

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 60500.00 | 60500.00 |
| (ii) Unitemized | 0.00 | 100.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 60500.00 | 60600.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 60500.00 | 60600.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 60500.00 | 60600.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 60500.00 | 60600.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 1504.00 | 1504.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1504.00 | 1504.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 44706.24 | 44706.24 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 2783.75 | 2783.75 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 48993.99 | 48993.99 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 48993.99 | 48993.99 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 60500.00 | 60600.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 60500.00 | 60600.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1504.00 | 1504.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1504.00 | 1504.00 |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 OF 11 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SAFE NATION PAC INC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Raymond Barrette | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012 |
| Mailing Address 9 Downing Rd | | Transaction ID : SA11AI.4102 |
| City Hanover | State NH | Zip Code 03755 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10000.00 | |
| Name of Employer White Mountain Insurance Group | Occupation CEO | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Foster Friess | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012 |
| Mailing Address 115 E. Snow King Avenue | | Transaction ID : SA11AI.4141 |
| City Jackson | State WY | Zip Code 83002 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10000.00 | |
| Name of Employer Self | Occupation Investor | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Hartman Oil Company | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012 |
| Mailing Address 10500 E Berekley Sq. Pkwy Suite 100 | | Transaction ID : SA11AI.4132 |
| City Wichita | State KS | Zip Code 67206 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 3000.00 | |
| Name of Employer | Occupation | Contribution |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3000.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 23000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 11 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SAFE NATION PAC INC

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Dr. George Rapier | | Date of Receipt 10 / 19 / 2012 Transaction ID : SA11AI.4135 |
| Mailing Address 8637 Fredericksburg Rd Suite 360 | | Amount of Each Receipt this Period 25000.00 |
| City San Antonio | State TX | Zip Code 78212 |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer WellMed Medical Management | Occupation CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 25000.00 | |

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Margaret Savercool | | Date of Receipt 10 / 29 / 2012 Transaction ID : SA11AI.4137 |
| Mailing Address 3605 Camp Mineola Rd | | Amount of Each Receipt this Period 10000.00 |
| City Mattituck | State NY | Zip Code 11952 |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Self | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Kenneth Slater | | Date of Receipt 10 / 30 / 2012 Transaction ID : SA11AI.4139 |
| Mailing Address 11 Sloan's Curve Road | | Amount of Each Receipt this Period 2500.00 |
| City Palm Beach | State FL | Zip Code 33480 |
| FEC ID number of contributing federal political committee. C | Contribution | |
| Name of Employer Tremont Partners | Occupation Asset Management | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 37500.00 |
| TOTAL This Period (last page this line number only).....▶ | 60500.00 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SAFE NATION PAC INC

Full Name (Last, First, Middle Initial)

A. RC Hammond Public Affairs, LLC

Mailing Address 1701 Pennsylvania Avenue NW
Suite 301-#458

City Washington State DC Zip Code 20006

Purpose of Disbursement
Communications

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4148

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. The Stoneridge Group

Mailing Address 4400 N. Point Parkway
Suite 190

City Alpharetta State GA Zip Code 30022

Purpose of Disbursement
Creative Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4146

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SAFE NATION PAC INC

Full Name (Last, First, Middle Initial)

A. Glendale Strategies, Inc.

Mailing Address 57 Waddell Street

City Marietta State GA Zip Code 30060

Purpose of Disbursement
Radio ads in support of Zoe Newton, nonfederal candidate in Kansas

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 19 | | | 2012 | | | |

Transaction ID : SB29.4145

Amount of Each Disbursement this Period

2783.75

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

2783.75

TOTAL This Period (last page this line number only)..... ▶

2783.75

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SAFE NATION PAC INC | FEC IDENTIFICATION NUMBER ▼ C C00529727 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Glendale Strategies, Inc. | | Date MM / DD / YYYY 10 / 31 / 2012 |
| Mailing Address 769 Nob Ridge Drive | | Amount 24760.00 |
| City Marietta | State GA | |
| Zip Code 30064 | Transaction ID : SE.4113 | |
| Purpose of Expenditure Direct mail | Category/Type 004 | Office Sought: <input type="checkbox"/> House State: ME <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: CYNTHIA ANN DILL | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 24760.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Glendale Strategies, Inc. | | Date MM / DD / YYYY 11 / 02 / 2012 |
| Mailing Address 769 Nob Ridge Drive | | Amount 9630.00 |
| City Marietta | State GA | |
| Zip Code 30064 | Transaction ID : SE.4117 | |
| Purpose of Expenditure Radio advertisements | Category/Type 004 | Office Sought: <input type="checkbox"/> House State: ME <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES EDWARD JR SUMMERS | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 34390.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

| | |
|--|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 34390.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bryan P Tyson
Signature

[Electronically Filed]

Date MM / DD / YYYY
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) SAFE NATION PAC INC | FEC IDENTIFICATION NUMBER ▼ C C00529727 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Glendale Strategies, Inc. | | Date MM / DD / YYYY 11 / 05 / 2012 |
| Mailing Address 769 Nob Ridge Drive | | Amount 6189.74 |
| City Marietta | State GA | |
| Zip Code 30064 | Transaction ID : SE.4126 | |
| Purpose of Expenditure Automated calls | Category/ Type 004 | Office Sought: <input type="checkbox"/> House State: ME <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES EDWARD JR SUMMERS | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 40579.74 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Glendale Strategies, Inc. | | Date MM / DD / YYYY 11 / 05 / 2012 |
| Mailing Address 769 Nob Ridge Drive | | Amount 4126.50 |
| City Marietta | State GA | |
| Zip Code 30064 | Transaction ID : SE.4127 | |
| Purpose of Expenditure Automated calls | Category/ Type 004 | Office Sought: <input type="checkbox"/> House State: ME <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: ANGUS STANLEY JR KING | | Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought 44706.24 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |

| | |
|--|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 10316.24 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | 44706.24 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bryan P Tyson
Signature

[Electronically Filed] Date **12 / 06 / 2012**